Effec	tice October	1. 2001						
CLAIMS A	S FILED - PA		uno 2)	SMALL (	ENTITY	OR	OTHEI SMALL	R THAN ENTITY
TOTAL CLAIMS				RATE	FEE	7	RATE	FEE
FOR	CAMABERTICE	t) titivi	BER EXTRA	BASIC FE	€ 370 00	OR	BASIC FEE	·
TOTAL CHARGEABLE GLAIM:	กแกบร	2(1= '		X\$ 9±		OR	X\$18=	
INDEPENDENT CLAIMS	minus	3 = 1	LADIE	YOU	1	OR	X84=	<del> </del>
MULTIPLE DEPENDENT CLAIM P	HESENT BES	ST AVAI	rybre /	4 140=		OB	+280·2	
If the difference in column 1 is	less than zero.	entei "O" in c	column 2	TOTAL	<del> </del>	-	TOTAL	
CLAIMS AS A	MENDED - F	PARTII			£74.171(71)/		OTHER	
(Column 1) CLAIMS	((	Column 2) HIGHEST	(Column 3)	SMALL	,	OR T	SMALL	
T tal		NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI TIONAL FEE	SE T	RATE	ADDI- TIONAL FEE
T tal . /8	Minus ;	20_	2	X\$. 9=		OR	X\$18=	م
Independent - 2	Minus /			X42-		OR	X84=	,
. FIRST PRESENTATION OF MU	CUPLE DEPENL	DENT CLAIM		+140=		OR	+280=	
		·		TOTAL ADDIT FEE		OD L	JOTAL DOIT FEE	<u>`~</u>
(Column 1)	(C	Column 2)	(Column 3)					:
CLAIMS REMAINING	PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	2.193 f. 18	RATE	ADDI- TIONAL FEE
S Committee of the state of the	Minus 🛶	, Alb ( Ott	= .	X\$ 9=		OR	X\$18=	1 44
findebeugeut v	Minus **		=	X42=		OR	X84=	,
HRST PRESENTATION OF MU	LTIPLE DEPENC	ENT CLAIM		+140=			+280=	<del></del>
				TOTAL		OR	TOTAL	
				ADDIT. FEE		OR A	DDIT FEE	
(Column 1) CLAIMS		Column 2) HIGHEST	(Column 3)				واستحصي	
REMAINING AFTER AMENDMENT  Total * / / / / / / / / / / / / / / / / / /	PI	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAȚE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total - 18	Minus **	20	=	X\$ 9=		OR	X\$18=	
Independent 4 4	Minus **	<u> </u>	= [	X42=		OR	X84= <b>8</b>	8400
FIRST PRESENTATION OF MU	ILTIPLE DEPEND	DENT CLAIM				7		
e de la companya de l		tu - ana 1	0	1140=		OR	+280=	-
If the entry in column 1 is less than the "High st Number Previously Pa	Id For IN THIS SPA	ACE is less that	n 20, enter "20."	TOTAL ADDIT. FEE	(8.8)	OR.	TOTAL DDIT, FEE	
The Highest Number Previously Pa	ild For" IN THIS SP d For" (Total or Inde	ACE is less that pendent) is the	ri 3, enter *3.* highest number f		propriate box			

ORM PTO-875 (Rev. 8/01)

Palent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

TEUS OPO 2001 402-124 / 50191

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/73\$ 374

(Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		19					RATE	FEE	1	RATE	FEE	
FC	FOR NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS   9 minus 20=			•	9		X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS 2 minus 3			nus 3 =	* 5	T.		X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	710.00		
CLAIMS AS AMENDED - PART II								. 1017.			OTHER	
(Column 1) (Column 2) (Column 3)							SMALL ENTITY			SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 10	Minus	·d	0	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 2	Minus	***	<u> </u>			X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	a light specification	OR.	*+270=		
* *,								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)				•	- k-1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		=	] [	X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		┚╽	+135=			+270=	
							L	TOTAL		OR	TOTAL	
		(0.1		<b>10</b> 1	0)	(0-1	-	ADDIT. FEE		OR	ADDIT. FEE	
F		(Column 1) CLAIMS		(Colur	IEST	(Column 3)	1 г	<del>- 1</del>	ADD!	. 1		ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=	. 0.	ÖR	X\$18=	
	Independent	*	Minus	***		= BES	371	AVAI	ABLE	OR	MPV	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					J	+135=			+270=		
		mn 1 is less than t					L	+135=		OR	TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											